



MISSOURI DEPARTMENT OF HEALTH  
STATE PUBLIC HEALTH LABORATORY  
DATAMASTER MAINTENANCE REPORT

BREATH ALCOHOL PROGRAM

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN

LAKE ST. LOUIS POLICE DEPT.

201261

DATE OF INSPECTION

05/28/09

LOCATION OF INSTRUMENT (STREET AND CITY)

200 CIVIC CENTER DRIVE LAKE ST. LOUIS MO 63367

TIME OF INSPECTION

1747 Hours

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

☒ DIAGNOSTIC CHECK (PRINTOUT ATTACHED)

☒ COMPUTER -OK

☒ DETECTOR -OK

☒ PROGRAM -OK

☒ FILTERS -OK

☒ HEATERS SAMPLE CHAMBER 48 °C

☒ QUARTZ STANDARD -OK

☒ FLOW DETECTOR -OK

☒ CALIBRATION -OK

☒ PUMP HIGH SPEED -OK

☒ PRINTER -OK

☒ INDICATOR LIGHTS -OK

☒ TIME AND DATE 05/28/09 1747 Hours

☒ SIMULATOR TEMPERATURE (34 °C ± 0.2 °C) 34.0 °C

☒ CALIBRATION CHECK -

Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

GUTH LABS  
Lot 08100  
Exp. 12/08/09

TEST 1 096

TEST 2 097

TEST 3 099

☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

☒ NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)

REFUSALS 2 (0-.04) 25 REFS TESTS (05-.09) 2 (.10-.14) (.15-.19) 2 (Over .19) 1

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

NONE

INSPECTING OFFICER

SIGNATURE

Gerald L. Crowley 239

PRINT NAME

GERALD L. CROWLEY 239

TYPE II PERMIT NUMBER/EXPIRATION DATE

820245 08/13/10

TELEPHONE NUMBER

(636) 625-808



# GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **08400** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain **0.1204** percent (w/vol) ethyl alcohol. The expiration date for this lot number is **December 8, 2009** at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , this solution will give a breath alcohol analysis instrument reading of **0.10** percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

### CERTIFIED ALCOHOL REFERENCE SOLUTION FOR SIMULATOR

<u>08400</u> LOT NO.	<u>12/8/08</u> MFG. DATE	<u>12/8/09</u> EXP. DATE
<u>275 Gal.</u> LOT VOL.	<u>500 ML</u> BOT. VOL.	<u>        </u> BOT. NO.

When this reference solution is used with a breath simulator certified by Guth Laboratories, a properly operating instrument will read 0.10

For additional information contact:

Guth Laboratories, Inc.  
590 North 67<sup>th</sup> Street, Harrisburg, PA 17111  
Toll Free 800-233-2338  
Rev. 4/02



Ted L. Pauley, President  
GUTH LABORATORIES, INC.

Face This Side Down - This Edge In First

**BAC DataMaster**  
**Evidence Ticket**

STATE OF MISSOURI  
LAKE SAINT LOUIS POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201261

05/28/09

17:47

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS  
SAMPLE CHAMBER: 48c

FLOW DETECTOR: OKAY

PUMP  
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()\*+,-./0123456789:;<=>?@ABCDEFGHIJ  
KLMNOPQRSTUVWXYZ[\]^\_`abcde+ghijklmno  
pqrstuvwxyz{|}~

Operator Signature

*Samuel H. Crowley* 238

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# BAC DataMaster Evidence Ticket

STATE OF MISSOURI  
LAKE SAINT LOUIS POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201261  
05/28/09

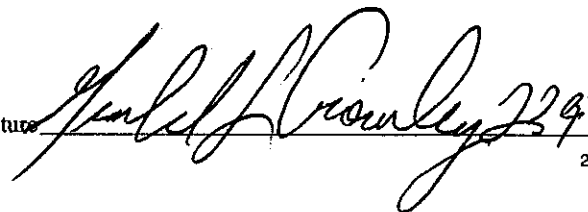
TESTING OFFICER:  
CROWLEY/GERALD/L  
OFFICER I.D.: 239  
PERMIT NUMBER: 820245  
EXPIRATION DATE: 08/13/10  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	17:50
INTERNAL STANDARD	VERIFIED	17:50
EXTERNAL STANDARD	.096	17:51
BLANK TEST	.000	17:51
EXTERNAL STANDARD	.097	17:52
BLANK TEST	.000	17:52
EXTERNAL STANDARD	.099	17:53
BLANK TEST	.000	17:53

N = 3  
SIM. = .1  
AVG. = .0973

Operator Signature



Face This Side Down - This Edge In First

**BAC DataMaster**  
**Evidence Ticket**

STATE OF MISSOURI  
LAKE SAINT LOUIS POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201261  
05/28/09

ARREST TIME: 17:00

SUBJECT NAME:

RFI/TEST

DOB: 01/01/81 SEX: M

STATE/D.L.: MO/123456789

ARRESTING OFFICER:

CROWLEY/GERALD/L

OFFICER I.D.: 239

TESTING OFFICER:

CROWLEY/GERALD/L

OFFICER I.D.: 239

PERMIT NUMBER: 820245

EXPIRATION DATE: 08/13/10

MISCELLANEOUS DATA:

RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	17:58
INTERNAL STANDARD	VERIFIED	17:58
RADIO INTERFERENCE		

Operator Signature

*Gerald H Crowley 239*

2208-02

State of Missouri  
DEPARTMENT OF HEALTH



P E R M I T  
TYPE II



GERALD CROWLEY

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 08/13/08  
Number 820245  
Expires 08/13/2010

*Eric C. Ostlund*  
Director of State Public Health Laboratory

Director, Department of Health